PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless corrected be maintenance fee notification	elow or directed otherwise	in Block 1, by (a	n) specifying a new c	orrespondence addre	ess; and/or (b) indicating a sep	parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) MEDTRONIC MINIMED INC. 18000 DEVONSHIRE STREET NORTHRIDGE, CA 91325-1219				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/816,021	03/31/2004	Garry M. Ste			PF00486 DIV	9550	
TITLE OF INVENTION:							
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	0	\$300	\$1700	08/16/2007	
EXAMINER		ART UNIT		LASS-SUBCLASS			
"Fee Address" indicate PTO/SB/47; Rev 03-02 or Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless	an assignee is identified be 37 CFR 3.11. Completion of	tion form of a Customer E PRINTED ON The clow, no assignee of this form is NO (E)	or agents OR, alter (2) the name of a registered attorney 2 registered patent listed, no name wi THE PATENT (print of data will appear on the control of t	single firm (having a r or agent) and the nattorneys or agents. Il be printed. or type) he patent. If an assignment.	s a member a 2ames of up to If no name is 3	document has been filed for	
Please check the appropriate	assignee category or categor	ries (will not be pr	rinted on the patent):	Individual 🛮	Corporation or other private gr	roup entity 🔲 Government	
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☑ Issue Fee ☐ A check in the amount o					• •		
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Advance Order - # of		Deposit Account Number 50-0621 (enclose an extra copy of this form).					
5. Change in Entity Status							
	MALL ENTITY status. See 3				IALL ENTITY status. See 37 C		
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Authorized Signature /Richard Yoon/			Date 08/01/2007				
Typed or printed name Richard Yoon			Registration No. 42,247				
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